

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1992

Application or Docket Number

116019

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	4	10 minus 20 = *
INDEPENDENT CLAIMS	2	7 minus 3 = * 5
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEE
	\$355.00
x\$11=	
x 37=	185
+115=	
TOTAL	540

RATE	FEE
	\$710.00
x\$22=	
x 74=	
+230=	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	* 48	Minus ** 20	= 28
Independent	* 39	Minus *** 7	= 32
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	308.00
x 37=	1184.00
+ 115=	
TOTAL	1492.00

RATE	ADDITIONAL FEE
x\$22=	
x 74=	
+230=	
TOTAL	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x 37=	
+ 115=	
TOTAL	

RATE	ADDITIONAL FEE
x\$22=	
x 74=	
+ 230=	
TOTAL	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	*	Minus **	=
Independent	*	Minus ***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x 37=	
+115=	
TOTAL	

RATE	ADDITIONAL FEE
x\$22=	
x 74=	
+230=	
TOTAL	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

UNITED STATES PATENT & TRADEMARK OFFICE  
Washington, D.C. 20231

8/10/93  
Oct 94 - 02530 NR

REQUEST FOR PATENT FEE REFUND									
1 Date of Request: <u>10/7/93</u>		2 Serial/Patent # <u>8/116019</u>							
3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT						
<input checked="" type="checkbox"/> Filing		<u>9-2-93</u>	\$ <u>66.00</u>						
<input type="checkbox"/> Amendment			\$						
<input type="checkbox"/> Extension of Time			\$						
<input type="checkbox"/> Notice of Appeal/Appeal			\$						
<input type="checkbox"/> Petition			\$						
<input type="checkbox"/> Issue			\$						
<input type="checkbox"/> Cert of Correction/Terminal Disc.			\$						
<input type="checkbox"/> Maintenance			\$						
<input type="checkbox"/> Assignment			\$						
<input type="checkbox"/> Other			\$						
		7 TOTAL AMOUNT OF REFUND	\$ <u>66.00</u>						
10 REASON:		8 TO BE REFUNDED BY:							
<input checked="" type="checkbox"/> Overpayment		Treasury Check							
<input type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:							
<input type="checkbox"/> No Fee Due (Explanation):		9 <table border="1"><tr><td></td><td></td><td>--</td><td></td><td></td><td></td></tr></table>				--			
		--							
11 REFUND REQUESTED BY:									
TYPED/PRINTED NAME: <u>Carmenita Robinson</u>		TITLE: <u>Dep Eng</u>							
SIGNATURE: <u>Carmenita M. Robinson</u>		PHONE: <u>308-1203</u>							
OFFICE: <u>ONAR</u>									
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****									
APPROVED: <u>Gay Hunt</u>		DATE: <u>10/13/93</u>							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance  
Refund Branch  
Crystal Park One, Room 802B